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STATEMENT OF

FEC FORM 1		ORGANIZ			Office Use Only
NAME OF COMMITTEE (in	n full)	(Check if name is changed)	Example: If typing, type over the lines.	12FE4M5	
WHIRLPO	OL CO	DRPORATION	N POLITICAL AC	TION CC	DMMITTEE
ADDRESS (number a	nd street)	701 Pennsylvania Avenue	e NW		
(Check if acis changed)		Suite 750 Washington		DC	20004
			CITY	STATE	ZIP CODE
COMMITTEE'S E-MA (Check if is change	address	S (Please provide only one amber_landis@whirlpool			
Ç	,				
COMMITTEE'S WEB	PAGE ADD	RESS (URL)			1
(Check if is change					
2. DATE 02	2 10	2012			
3. FEC IDENTIFIC	CATION NU	MBER C	C00039040		
4. IS THIS STATE	MENT X	NEW (N) OR	AMENDED (A)		
I certify that I have e	examined thi	is Statement and to the be	est of my knowledge and belief it	is true, correct	and complete.
Type or Print Name	of Treasurer	AMBER J LANDIS			
Signature of Treasure	AMBER er	J LANDIS	[Electronically Filed]	Date 02	10 / 2012
NOTE: Submission of			on may subject the person signing t		the penalties of 2 U.S.C. §437g.
Office Use Only			For further information c Federal Election Commissi Toll Free 800-424-9530 Local 202-694-1100		FEC FORM 1 (Revised 02/2009)

	FEC Fo	rm 1 (Revised 02/2009)	Page 2
		COMMITTEE Committee:	
(a)		This committee is a principal campaign committee. (Complete the candidate information below.)	
(b)		This committee is an authorized committee, and is NOT a principal campaign committee. (Compleinformation below.)	ete the candidate
Nam Can	e of didate		
	didate / Affiliati	on Office Sought: House Senate President	State
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Nam Cand	e of didate		
Par	ty Con	nmittee:	a managaratia
(d)		· · · · ·	emocratic, epublican, etc.) Party.
Poli	tical A	action Committee (PAC):	
(e)	\times	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization on line 6.)	ected organization is a
		X Corporation Corporation w/o Capital Stock	Labor Organization
		Membership Organization Trade Association	Cooperative
		In addition, this committee is a Lobbyist/Registrant PAC.	
(f)		This committee supports/opposes more than one Federal candidate, and is NOT a separate segronmittee. (i.e., nonconnected committee)	regated fund or party
		In addition, this committee is a Lobbyist/Registrant PAC.	
		In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)	
Join	t Fund	Iraising Representative:	
(g)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, at least one of which is an authorized committee of a federal candidate.	or more political
(h)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, none of which is an authorized committee of a federal candidate.	or more political
	Com	mittees Participating in Joint Fundraiser	
	1.	FEC ID number	
	2.	FEC ID number	
	3.	FEC ID number	
	Δ		

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FEC Form 1	(Revised 0	2/2009)																Pa	age	3	
Write or Type Comm	nittee Name																				
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6. Name of Any Co	onnected O	rganizatio	n, Affili	ated	Comi	mitte	e, Joi	nt F	undr	aisin	g Rep	orese	ntati	ve, c	or Le	ader	ship	PAG	C Sp	ons	or
NONE																					
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Mailing Address		1																			
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Relationship:	Connected	Organizat	ion	Affilia	ted C	ommi	ttee		Joint	Fund	Iraisin	g Re	orese	ntati	ve	L	eade	rship	PA	C Sp	onsor
7. Custodian of Rebooks and records		ify by nan	ne, addr	ess (_l	phone	e num	ber -	- op	tiona	l) and	d pos	ition	of the	e pei	rson	in po	osses	ssior	n of	com	—— mittee
Full Name	AMBER J L	ANDIS		1 1	1 1	ı	1 1	ı	1 1			1 1	1 1		1	1 1	ı	1 1	ı		
		701 PEN	NSYLVA	NIA A	AVEN	UE															
Mailing Address		SUITE 75	50																		
		WASHIN	IGTON										DC ,		,20	0003					
												L			L				- L		
Title or Position					CITY	′						ST	ATE				ZIF	, CC	DE		
									Tel	epho	ne nu	mber]-[- L		
8. Treasurer: List the any designated ac					er (option	al) of	f the	trea	surer	of th	e coi	nmitt	ee; a	and t	the n	ame	and	ado	lress	of
Full Name of Treasurer	AMBER J L	ANDIS						ı													
Mailing Address		701 PENI	NSYLVA	NIA A	VEN	JE															

8.	Treasurer: List the name an any designated agent (e.g., a	d address (phone number optional) of the treasurer of the committee; and the name and address of assistant treasurer).
	Full Name AMBER J of Treasurer	LANDIS
	Mailing Address	701 PENNSYLVANIA AVENUE
		SUITE 750
		WASHINGTON
		CITY STATE ZIP CODE
L	Title or Position Govt Relations Spec	

	m 1 (Revised 02/2009)	Page 4
Full Name of Designated	1	
Agent		
Mailing Address		
Title 5 11	CITY STATE	ZIP CODE
Title or Position	Telephone number	. , , _
	Telephone number	
Mailing Address	Chemical Shoreline Bank 823 Riverview Drive	
	Benton Harbor	22
		22 ZIP CODE
Name of Bank,	Benton Harbor CITY STATE	
Name of Bank,	Benton Harbor CITY STATE	
Name of Bank, Mailing Address	Benton Harbor CITY STATE Depository, etc.	
	Benton Harbor CITY STATE Depository, etc.	
	Benton Harbor CITY STATE Depository, etc.	